



Atty Docket No. 02307K-085041US

PTO FAX NO.: 1-800-273-8300

ATTENTION: Examiner Kolker, Daniele

Group Art Unit 1649

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Kolker, Daniele

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of Charo et al., Application No. 10/791,166, filed March 1, 2004 for MAMMALIAN MONOCYTE CHEMOATTRACTANT PROTEIN RECEPTORS are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

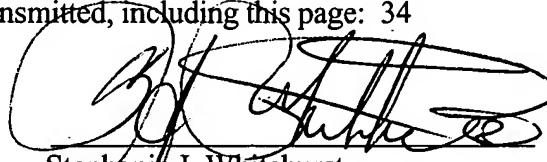
Documents Attached

1. Amendment w/3 references
2. Petition for Extension of Time Under 37 CFR 1.136(a)



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Dated: March 17, 2006


Stephanie J. Whitehurst

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2665



PTO/SB/21 (09-04)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/791,166
	Filing Date	March 1, 2004
	First Named Inventor	Charo, Israel F.
	Art Unit	1649
	Examiner Name	Kolker, Daniel
	Attorney Docket Number	02307K-085041US
Total Number of Pages in This Submission	47	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply filed 03/17/06 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard; Request for Continued Examination with fee authorization (1 pg., 2 copies); attachments to Amendment: Koch et al.; Boring et al.; Jones et al.
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

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Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Kevin Bastian		
Date	05/18/2006	Reg. No.	34,774

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ATTENTION: Examiner Kolker, Daniele		Group Art Unit 1649			
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